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	INFORMATION DISCLOSURE	. Application Number	10/569,470		
		Filing Date	October 20, 2006		
STATEMENT BY APPLICANT		First Named Inventor	Yutaka NISHIOKA		
	Form PTO/SB/08a	Art Unit	8564		
	(Use as many sheets as necessary)	Examiner Name			
Choof	1 of 1	Attornou Dooket Number	026200 00024		

Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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FOREIGN PATENT DOCUMENTS

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Examiner	Wally Cambatta!	Date	04/00/0040
Signature	/Kelly Gambetta/	Concldered	101/06/2010
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This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO) or process) an application. Confidentiality is governed by 39 U.S. C. 12 and 37 CFR 1.1.4. This collection is estimated to take 2 hours be compreted, including against preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the agreement of time procure to complete this form and/or suppeasants for reviousing this burdon, should be sent to the Chief information (Gincu. U.S. Peatent and Tradonarx Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1459, Alexandria, Virginia 22313-1450.